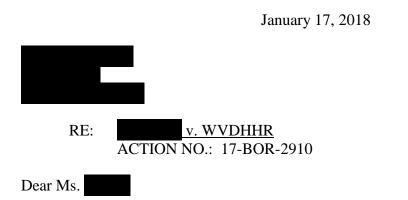


STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES OFFICE OF INSPECTOR GENERAL BOARD OF REVIEW Raleigh District DHHR 407 Neville Street Beckley, WV 25801

Bill J. Crouch Cabinet Secretary



Jim Justice

Governor

Enclosed is a copy of the decision resulting from the hearing held in the above-referenced matter.

In arriving at a decision, the State Hearing Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Health and Human Resources. These same laws and regulations are used in all cases to assure that all persons are treated alike.

You will find attached an explanation of possible actions you may take if you disagree with the decision reached in this matter.

Sincerely,

Kristi Logan State Hearing Officer Member, State Board of Review

Encl: Appellant's Recourse to Hearing Decision Form IG-BR-29

cc: Beverly Ballengee, County DHHR

WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES BOARD OF REVIEW

Appellant,

v.

Action Number: 17-BOR-2910

WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES,

Respondent.

DECISION OF STATE HEARING OFFICER

INTRODUCTION

This is the decision of the State Hearing Officer resulting from a fair hearing for This hearing was held in accordance with the provisions found in Chapter 700 of the West Virginia Department of Health and Human Resources' Common Chapters Manual. This fair hearing was convened on January 16, 2018, on an appeal filed November 27, 2017.

The matter before the Hearing Officer arises from the November 17, 2017, decision by the Respondent to terminate the Appellant's SSI-Related (Spenddown) Medicaid benefits.

At the hearing, the Respondent appeared by Beverly Ballengee, Family Support Supervisor. The Appellant appeared *pro se*. All witnesses were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Notice of Decision dated November 17, 2017
- D-2 Hearing Request dated November 27, 2017
- D-3 Hearing Request Notification Form
- D-4 Board of Review Scheduling Order dated December 7, 2017
- D-5 West Virginia Income Maintenance Manual §1.18.8.B

After a review of the record, including testimony, exhibits, and stipulations admitted into evidence at the hearing, and after assessing the credibility of all witnesses and weighing the evidence in consideration of the same, the Hearing Officer sets forth the following Findings of Fact.

FINDINGS OF FACT

- 1) The Appellant met a spenddown in May 2017, and SSI-Related Medicaid benefits were opened effective June 1, 2017.
- 2) The Respondent notified the Appellant by letter on November 17, 2017, that her Medicaid benefits would end effective November 30, 2017 (Exhibit D-1).
- 3) This notice advised the Appellant that the time limit for this type of Medicaid coverage had expired and that she had to reapply for coverage (Exhibit D-1).
- 4) The Appellant's period of consideration (POC) was June 1, 2017, through November 30, 2017.

APPLICABLE POLICY

West Virginia Income Maintenance Manual §1.18.8.B states that spenddown Assistance Groups (AGs) are not redetermined and are closed at the end of the sixth month of the POC. The last month of the six-month POC is coded in the eligibility system. The client must reapply for a new POC using one of the application methods described above. Spenddown AGs are mailed a letter at adverse action notice deadline during the sixth month of the POC. This letter informs the client that his eligibility will end on the last day of the month and that he must reapply for Medicaid coverage.

DISCUSSION

Pursuant to policy, spenddown Medicaid assistance groups are not reviewed. At the end of the sixmonth period of eligibility, notice is issued to the recipient advising of the expiration of the spenddown Medicaid, and of the requirement to reapply for continued coverage.

The Respondent sent notice to the Appellant on November 17, 2017, advising the Appellant that the six-month period of consideration for her Medicaid was expiring on November 30, 2017. A new application is required for spenddown Medicaid coverage.

The Appellant testified that she was unaware that her Medicaid benefits were time-limited and assumed that since she was disabled, that Medicaid coverage was automatic.

The Respondent correctly terminated the Appellant's spenddown Medicaid benefits when her period of consideration ended.

CONCLUSIONS OF LAW

1) Spenddown Medicaid is terminated at the end of the six-month period of consideration.

- 2) The Appellant's six-month period of consideration expired on November 30, 2017.
- 3) The Respondent acted in accordance with policy in terminating the Appellant's spenddown Medicaid benefits, effective November 30, 2017.

DECISION

It is the decision of the State Hearing Officer to **uphold** the decision of the Respondent to terminate the Appellant's SSI-Related (Spenddown) Medicaid benefits.

ENTERED this 17th day of January 2018

Kristi Logan State Hearing Officer